

FEB 04 2005



TRANSMITTAL FORM

Application Serial Number	10/642,509
Filing Date	August 18, 2003
First Named Inventor	Jeff C. Sellers
Group Art Unit	2632
Examiner Name	Walberg, Teresa
Attorney Docket No.	ASX-064
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]		
<input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449		
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Proskauer Rose LLP
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 Boston, MA 02110-2600
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Respectfully submitted,

Deborah M. Vernon
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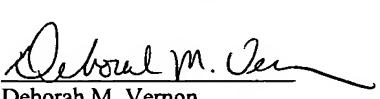
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Express Mail Mailing Label No. EV470404793US

<i>Complete if Known</i>	
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METHOD OF PAYMENT

FEE CALCULATION (continued)

<input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				4. ADDITIONAL FEES			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081 <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. <input type="checkbox"/> Applicant claims small entity status.				Large Entity	Small Entity		
				Fee (\$)	Fee (\$)	Fee Description	Fee Paid
				130	65	Surcharge - late filing fee or oath	
				50	25	Surcharge - late provisional filing fee or cover sheet	
				130	130	Non-English specification	
				2,520	2,520	Request for ex parte re-examination	
				120	60	Extension for reply within 1 st mo.	120
				450	225	Extension for reply within 2 nd mo.	
				1,020	510	Extension for reply within 3 rd mo.	
				1,590	795	Extension for reply within 4 th mo.	
				2,160	1,080	Extension for reply within 5 th mo.	
				500	250	Notice of Appeal	
				500	250	Filing a brief in support of an appeal	
				1,000	500	Request for oral hearing	
				400	0	Petitions to the Director	
				180	180	Submission of IDS	180
				790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
				790	395	For each additional invention to be examined (37 CFR 1.129(b))	
				100	100	Certificate of Correction for applicant's error	
				110	55	Submission of Terminal Disclaimer	
				Other fee (Specify) _____			
				Other fee (Specify) _____			
						4. TOTAL:	300
						TOTAL AMOUNT SUBMITTED	
						(\$) 2410.00	
3. APPLICATION SIZE FEE							
If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid	SIGNATURE BLOCK		
-100 =	/50 =	round up to a whole number	x	=	Respectfully submitted,		
3. TOTAL:							
CORRESPONDENCE ADDRESS							
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Date: February 4, 2005 Reg. No.. 55,699 Tel. No.: (617) 526-9836 Fax No.: (617) 526-9899 Deborah M. Vernon Agent for the Applicant(s) Proskauer Rose LLP One International Place Boston, MA 02110-2600							

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